**Student Survey Questions PDF**

**Title:** Comprehensive Student Experience Survey

**Introduction:**

Please take a few moments to help us improve your educational experience. Your feedback is invaluable.

**Personal Information:**

* **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Academic Experience:**

* **1. How satisfied are you with your academic curriculum?**
  + Very Satisfied
  + Satisfied
  + Neutral
  + Dissatisfied
  + Very Dissatisfied
* **2. Rate the effectiveness of the learning resources provided.**
  + Very Effective
  + Effective
  + Neutral
  + Ineffective
  + Very Ineffective
* **3. How well do your instructors engage with the students?**
  + Very Well
  + Well
  + Neutral
  + Poorly
  + Very Poorly

**Campus Life:**

* **1. Are you involved in any extracurricular activities?**
  + Yes
  + No
* **2. How safe do you feel on campus?**
  + Very Safe
  + Safe
  + Neutral
  + Unsafe
  + Very Unsafe
* **3. How would you rate the overall campus facilities?**
  + Excellent
  + Good
  + Fair
  + Poor
  + Very Poor

**Conclusion:**

Any additional comments or suggestions?